

## CGU Stella Junior 2022

*Mobility and training programme for students*

### WORK PLAN

Home university

#### DATA OF THE BENEFICIARY OF THE GRANT

|                             |                                       |
|-----------------------------|---------------------------------------|
| Name and surname            |                                       |
| Home university             |                                       |
| Host department             |                                       |
| Host university             |                                       |
| Code of the placement offer |                                       |
| Mobility period             | From day/month/year to day/month/year |

#### DATA OF THE PERSON RESPONSIBLE FOR THE MOBILITY

|                  |  |
|------------------|--|
| Name and surname |  |
|------------------|--|

Only fill in the boxes corresponding to the number of days of your mobility. I.e. if your mobility is for 2 weeks you only have to fill in the information up to the second week.

|                        |           |                                       |
|------------------------|-----------|---------------------------------------|
| Week 1 of the mobility | Date      | From day/month/year to day/month/year |
|                        | Work plan |                                       |
| Week 2 of the mobility | Date      | From day/month/year to day/month/year |
|                        | Work plan |                                       |
| Week 3 of the mobility | Date      | From day/month/year to day/month/year |
|                        | Work plan |                                       |
| Week 4 of the mobility | Date      | From day/month/year to day/month/year |
|                        | Work plan |                                       |

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|                         |           |                                       |
|-------------------------|-----------|---------------------------------------|
| Week 5 of the mobility  | Date      | From day/month/year to day/month/year |
|                         | Work plan |                                       |
| Week 6 of the mobility  | Date      | From day/month/year to day/month/year |
|                         | Work plan |                                       |
| Week 7 of the mobility  | Date      | From day/month/year to day/month/year |
|                         | Work plan |                                       |
| Week 8 of the mobility  | Date      | From day/month/year to day/month/year |
|                         | Work plan |                                       |
| Week 9 of the mobility  | Date      | From day/month/year to day/month/year |
|                         | Work plan |                                       |
| Week 10 of the mobility | Date      | From day/month/year to day/month/year |
|                         | Work plan |                                       |
| Week 11 of the mobility | Date      | From day/month/year to day/month/year |
|                         | Work plan |                                       |
| Week 12 of the mobility | Date      | From day/month/year to day/month/year |
|                         | Work plan |                                       |

Date: day/month/year

Signature of the beneficiary of the grant:

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Signature of the person responsible for mobility: